

C/B+F

| ROUTING AND TRANSMITTAL SLIP  |                      | Date             |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
|---|----------------------|------------------|--------|------|-----------------|----------|---------------|------------------|--------------|----------------|---------------|-----------|----------------------|--------|---------|-------------|-----------|--------------|---------|--|
| TO: (Name, office symbol, room number, building, Agency/Post)   |                      | 1/20/84          |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| 1. AEO  | Initials             | Date             |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| 2. EO   | AW                   | 1/20             |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| 3. DD/L   | HA                   | 20/1             |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| 4. D/L  |                      |                  |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| <table border="1"> <thead> <tr> <th>Action</th> <th>File</th> <th>Note and Return</th> </tr> </thead> <tbody> <tr> <td>Approval</td> <td>For Clearance</td> <td>Per Conversation</td> </tr> <tr> <td>As Requested</td> <td>For Correction</td> <td>Prepare Reply</td> </tr> <tr> <td>Circulate</td> <td>For Your Information</td> <td>See Me</td> </tr> <tr> <td>Comment</td> <td>Investigate</td> <td>Signature</td> </tr> <tr> <td>Coordination</td> <td>Justify</td> <td></td> </tr> </tbody> </table> |                      |                  | Action | File | Note and Return | Approval | For Clearance | Per Conversation | As Requested | For Correction | Prepare Reply | Circulate | For Your Information | See Me | Comment | Investigate | Signature | Coordination | Justify |  |
| Action  | File                 | Note and Return  |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| Approval  | For Clearance        | Per Conversation |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| As Requested  | For Correction       | Prepare Reply    |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| Circulate   | For Your Information | See Me           |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| Comment   | Investigate          | Signature        |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| Coordination  | Justify              |                  |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |
| REMARKS   |                      |                  |        |      |                 |          |               |                  |              |                |               |           |                      |        |         |             |           |              |         |  |

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Action: C/1455 T.  
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DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

FROM: (Name, org. symbol, Agency/Post)

Room No.—Bldg.

Phone No.



84-0202

## ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FY 86 Standard Support Requirements

|   |          |           |                            |
|---|----------|-----------|----------------------------|
| FROM: <input type="text"/>  |          | EXTENSION | NO.                        |
| EO/DDA<br>7D18 HQ   |          |           | DATE<br><b>19 JAN 1984</b> |
| TO: (Officer designation, room number, and building)  | DATE     |           | OFFICER'S INITIALS         |
|   | RECEIVED | FORWARDED |                            |
| COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.) |          |           |                            |
| 1. D/OC<br>2B07 <input type="text"/>  |          |           |                            |
| 2. D/ODP<br>2D00 HQ   |          |           |                            |
| 3. D/OF<br>616 Key  |          |           |                            |
| 4. D/OIS<br>1206 Ames   |          |           |                            |
| 5. D/OL<br>2B07 <input type="text"/>  |          |           |                            |
| 6. D/OMS<br>1D4054 HQ   |          |           |                            |
| 7. D/OP<br>6N20 <input type="text"/>  |          |           |                            |
| 8. D/OS<br>6S17 <input type="text"/>  |          |           |                            |
| 9. D/OTE<br>1026 CoC  |          |           |                            |
| 10.   |          |           |                            |
| 11.   |          |           |                            |
| 12.   |          |           |                            |
| 13.   |          |           |                            |
| 14.   |          |           |                            |
| 15.   |          |           |                            |

CONFIDENTIAL



84-0202

19 JAN 1984

MEMORANDUM FOR: Director of Communications  
Director of Data Processing  
Director of Finance  
Director of Information Services  
Director of Logistics  
Director of Medical Services  
Director of Personnel  
Director of Security  
Director of Training and Education

FROM:

[redacted]  
Executive Officer to the DDA

SUBJECT:

FY 1986 Standard Support Requirements [redacted]

REFERENCE:

DA 1985 Program Standard Support Requirements

1. We have been advised by the Office of the Comptroller that the concept of applying Standard Support Requirements (SSRs) to all new Agency initiatives will be used again in FY 1986. While this will be the third year of utilizing the SSRs, we feel some minor adjustments to the formulas and/or factors are required. Although the basic concept has been accepted by all of our reviewers, both internal and external, justification of the amounts of requested resources will always be subject to scrutiny. We, therefore, request that each office review their methodology and resource needs with the thought of being able to justify the SSRs to various reviewers. [redacted]

2. To simplify this process, we request that you make a copy of the applicable pages of the 1985 Program SSR booklet and make only "pen and ink" changes. Any substantial changes should be typed with a footnote comment providing the justification for the change. This also includes large revisions in resource requests. The DDA/MS will revise the personnel service amounts if appropriate. [redacted]

3. During the SSR process in FY 85, it was found that most new initiatives failed to provide clear information about the number of additional contracts that they would produce. Consequently, this section of the booklet was not applied. Therefore, the contractual services section (see pages 23-25 of reference) must be revised to tie resource needs to substantial increases in contractual service funds only--and not to the number of additional contracts. [redacted]

4. We feel that the Agency cannot expect further large increases in manpower in FY 1986. We, therefore, caution each office to pay

particular attention to those other nonpersonnel-related factors that would provide you needed resources to continue the same services if additional nonpersonnel funds were received in other components' initiatives. As an example, more external research may not result in an increase of personnel, but could increase the processing and paying of more invoices. [redacted]

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5. We expect relatively few changes this year to the SSR booklet and hope that in future years, only the resources requested and not the methodology will change. Please forward your revisions as soon as completed, so that we can start on various parts of the SSR booklet, but not later than 10 February 1984. If you have any questions or need further guidance, please contact [redacted] (green) for assistance. [redacted]

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